

PERMIT APPROVED

Signature\_\_\_\_\_

Approval Date\_\_\_\_\_

Date of Pre-Build Meeting\_\_\_\_\_

CITY OF MISSION HILLS

Application for Building Permit

6300 State Line Road

Mission Hills, KS 66208

(913) 362-9620

Fax: (913) 362-0673

info@missionhillsks.gov

Date Submitted: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_

I/we hereby make application for a building permit pursuant to the Mission Hills Zoning Regulations, and state and certify as follows:

1. Street address is: \_\_\_\_\_
2. Owners of the property are: \_\_\_\_\_
3. Provide a complete description of all activity that will be covered by this building permit: \_\_\_\_\_
- \_\_\_\_\_
4. Principal materials of construction are: \_\_\_\_\_
5. Property upon which the proposed construction will occur is platted.
6. Estimated cost of the proposed construction is: \_\_\_\_\_
7. Total square footage of the proposed project is: \_\_\_\_\_
8. Total square footage of land that will be disturbed is: \_\_\_\_\_
9. Amount of fill being brought onto the property (in cubic yards) is: \_\_\_\_\_  
[Fill is the deposit of natural earth materials (except mulch), including soil, rock, & gravel, placed by artificial means.]
10. Distance of land disturbance activity from creek or property line is: \_\_\_\_\_
11. Slope of property at site of land disturbance activity is: \_\_\_\_\_  
[Slope is how far the grade drops in the area of the disturbance, such as 1 foot vertical by 15 feet horizontal.]
12. The person or entity erecting the proposed structure has liability insurance in an appropriate amount.

\_\_\_\_\_

Name of Contractor

\_\_\_\_\_

Street Address

\_\_\_\_\_

City, State & Zip

\_\_\_\_\_

Daytime Phone

\_\_\_\_\_

Evening Phone

\_\_\_\_\_

Contractor E-mail Address

\_\_\_\_\_

Name of Property Owner

\_\_\_\_\_

Street Address

\_\_\_\_\_

City, State & Zip

\_\_\_\_\_

Daytime Phone

\_\_\_\_\_

Evening Phone

\_\_\_\_\_

Signature of Property Owner

Johnson County Contractor License No. & Class/Kansas State Registration No. for roofing work \_\_\_\_\_Mission Hills Occupational License

Contractor Signature - Verifies any subcontractors are licensed by Johnson County to complete work

Permit is based on: \_\_\_\_\_ cost \_\_\_\_\_square footage \_\_\_\_both (see back for calculation)

INSPECTIONS

Footing \_\_\_\_\_

Stem Walls \_\_\_\_\_

Rough-In \_\_\_\_\_

Drive Approach \_\_\_\_\_

Gas Test \_\_\_\_\_

Final \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

FOR CITY USE ONLY

Permit Cost: \_\_\_\_\_

Inspection Fees: \_\_\_\_\_

Stormwater/  
Floodplain Fee: (\$250):\_\_\_\_\_

Total: \_\_\_\_\_

Date Fees Paid: \_\_\_\_\_

Permit Expires: \_\_\_\_\_

City Clerk:\_\_\_\_\_

Extension Date: \_\_\_\_\_

Extension Amount: \_\_\_\_\_

Extension Approval: \_\_\_\_\_

Bond Amount: \_\_\_\_\_

[Concrete=\$2,500; Subst. Const. =\$5,000]

LDA permit needed: \_\_\_\_\_Yes\_\_\_\_\_No

PROFESSIONAL REVIEW FEE: \$2,000

DATE PAID: \_\_\_\_\_

PLAN REVIEW FEE:

DATE PAID: \_\_\_\_\_

Date: \_\_\_\_\_

Plans Approved by the **ARCHITECTURAL REVIEW BOARD** subject to the following:

Signatures:

CALL FOR INSPECTIONS

AT LEAST 24 HOURS IN

ADVANCE.

Plans Approved by the Board of Zoning Appeals: \_\_\_\_\_

Date\_\_\_\_\_

**NOTICE TO APPLICANTS AND OWNERS:** The issuance of a permit is subject to appeal within thirty (30) days to the Board of Zoning Appeals. Incur expenses at your own risk, under permit, until right of appeal has elapsed.